Rev. 06/2006

LOBBYIST MONTHLY REPORT FORM

State of Idaho Ben Ysursa

Secretary of State

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To	Re	Filed	Po.	
	.,-0	Litera	Dy.	

LOBBYISTS (Sec. 67-6619)

___of____Page(s) THIS SPACE FOR OFFICE USE ONLY

(Type or print clearly in black ink) See instructions at bottom of page							STATE OF IDAHO					
Lobbyist's name and permanent business address						Date prepared			Period	Period covered		
Qwest Communications 999 Main 11th Floor Boise,ID 83702							04 09 0	(Me.	í I	(Yr.)		
Item Totals of all reportable expenditures made or incu					by Lobbyis	t or by	Lobbvist's Empl	over on be	half of Lobb	vist's Emplo	ver.	
Category of Expenditure Reimbursed Personal Living and Travol Expenses Pertaining to Lobbying Activity Do Not Have to be Reported *Total Amount for All Employers			Proportion	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)								
			All Employers	Empio	yer No. 1	1 Employer No. 2		Emplo	yer No. 3	Employer	No. 4	
Entertainment Food and Refreshment Living Accommodations		\$86.76	2		s _		s		s			
Adv erti Travel												
Telepho Other E	ne xpenses or S	ervices				_						
ltem	the number of	Total of employers you feach expendit	\$ 86.76	nires multiple	0.00 L-2 forms to	s _	0.00	for all cm	ployers should	d be entered to officials.	0.00 on Page 1.	
2.	Date		Place		Amou		Names of Legisi				in Group	
	Continued on a	attached page(s)					·					
INSTRUCTIONS						tem 3	Employer(s) Name(s) and Address(es)					
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code Filing deadline: Monthly reports due within ten (10) days of the					n	No. 1 Qwest Communications 999 Main 11th Floor, Bolse, ID						
		es of the past n	nonth.									
TO BE FILED WITH: Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282				No.								

Item 4		Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or interpersonal property to any Legislator, Public or Executive Official or for or on behalf of any Legislator, Public or Executive Official.						olic or Executive Official.		
	r	Datc	Amount	Na	me of	egislator, Public or Executive Off	icial Re	cciving or Benefiting		
Item 5	Subject matter of proposed legislation, the number of the Senate or House Bill. Resolution or other legislative activity in which the Lebburg was supporting or opposing			Code	LEGISLATIVE SUBJECT IDENTIFICATION Code Subject Code Subject					
Subject (from 30	tabic)	obbyist was supporting or of Bill, Resolution or Other Legislative Ident, Number Communications		· · · · · · · · · · · · · · · · · · ·		Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, federal Government, federal Government, special districts Government, state	17 18 19 20 21 22 23 24 25 26 27 28 29 30	Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV. gas Other (please specify)		
6	bid or I	y any rule bid proces ting or op	s, financial service	sion, procurement, contract, s or bond lobbyist was		CERTIFICATION: I hereby certification in accordance w	y that th	ne above is a true, complete and ion 67-6624 Idaho Code. U 9 10 8 Date		